

Amendments to the Claims:

1-44. (Canceled)

45. (Currently) A method for ~~treating~~ preventing or reducing the risk of developing graft-versus-host disease in a patient who is a recipient of an organ or tissue transplant, comprising:
administering to the transplant recipient pentostatin in a pharmaceutically effective amount ~~after the transplantation~~ within a predetermined time window before the transplantation.

46. (Previously Presented) The method claim 45, wherein the transplant recipient is transplanted with bone marrow.

47. (Previously Presented) The method of claim 45, wherein the transplant recipient is transplanted with hematopoietic stem cells.

48. (Previously Presented) The method of claim 45, wherein the transplant patient is transplanted with hematopoietic stem cells and treated in a myeloablative conditioning regimen.

49. (Previously Presented) The method of claim 45, wherein pentostatin is administered orally to the transplant recipient.

50. (Previously Presented) The method of claim 45, wherein pentostatin is administered parenterally to the transplant recipient.

51. (Previously Presented) The method of claim 45, wherein pentostatin is administered to the transplant recipient by intravenous infusion at a dose between about 1-10 mg/m².

52. (Previously Presented) The method of claim 45, wherein pentostatin is administered to the transplant recipient by intravenous infusion at a dose between about 2-6 mg/m².

53. (Previously Presented) The method of claim 45, wherein pentostatin is administered to the transplant recipient by intravenous infusion at a dose between about 0.1-2 mg/m².

54. (Previously Presented) The method of claim 45, wherein pentostatin is administered to the transplant recipient by intravenous infusion at a dose between about 0.5-1 mg/m².

55. (Canceled).

56. (Currently Amended) The method of claim 45, further comprising: administering to the transplant recipient an immunosuppressive agent selected from the group consisting of prednisone, methylprednisolone, cyclophosphamide, cyclosporin A, FK506, thalidomide, azathioprine, Daclizumab, Infliximab, MEDI-205, abx-cbl and ATG.